

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**FY 2006**

(Fees pursuant to the Consolidation appropriations Act, 2005 (H.R. 4818).)

Docket Number (Optional)

101137-56

Application Number

10/511,700

Filed

October 15, 2004

For

**MODIFICATION OF THE PROPERTIES OF A FIBRIN MATRIX WITH RESPECT
TO GROWTH AND INGROWTH OF CELLS**

Art Unit

1651

Examiner

Sandra E. SAUCIER

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate fee are as follows (check time period desired and enter the appropriate fee):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	\$ <u>130</u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$ _____

- ☐ Applicant claims small entity status. See 37 CFR 1.26.
- ☐ A check in the amount of the fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 14-1263. I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038

I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 25,900

☐ attorney or agent under 37 CFR 1.34(a).
Registration number if acting under 37 CFR 1.34(a) _____



Signature

08/06/2009

Date

Serle I. MOSOFF

Typed or printed name

(212) 808-0700

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

